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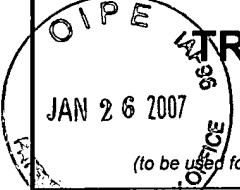
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PTO/SB/21 (05-03)

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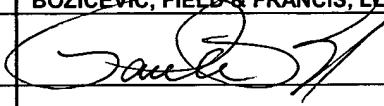
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 TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/816,159
		Filing Date	March 31, 2004
		First Named Inventor	NADEL, JAY A.
		Group Art Unit	1614
		Examiner Name	Zara, Jane J.
Total Number of Pages in This Submission	6 pages	UCSF-085CON5	UCSF-085CON5

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence <input type="checkbox"/> Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i> <i>Form PTO/SB/08a Copy of Norwegian Official Action Two references Return Postcard</i>
<input type="checkbox"/> Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Signing Attorney/Agent (Reg. No.)	PAULA A. BORDEN, 42,344 BOZICEVIC, FIELD & FRANCIS, LLP
Signature	
Date	January 26, 2007

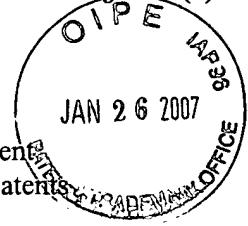
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**INFORMATION
DISCLOSURE STATEMENT
UNDER 37 C.F.R. § 1.97(e)**

Address to:
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P.O. Box 1450
Alexandria, VA 22313-1450



Attorney Docket	UCSF-085CONS5
First Named Inventor	NADEL, JAY A.
Application Number	10/816,159
Confirmation No.	9049
Filing Date	March 31, 2004
Group Art Unit	1614
Examiner Name	Zara, Jane J.
Title: <i>"PREVENTING AIRWAY MUCUS PRODUCTION BY ADMINISTRATION OF EGF-R ANTAGONISTS"</i>	

Sir:

Applicants submit herewith patents and/or publications which may be material to the examination of this application and in respect of which there may be a duty to disclose in accordance with 37 C.F.R. § 1.56. While this Statement may be "material" pursuant to 37 C.F.R. § 1.56, it is not intended to constitute an admission that any patent, publication, or other information referred to therein is "prior art" for this invention unless specifically designated as such. A listing of patents and/or publications is shown on enclosed Form PTO-SB/08A and a copy of each patent and/or publication is also enclosed.

Each item of information contained in the Information Disclosure Statement filed herewith was first cited in any communication from a foreign patent office in a counterpart foreign application not more than three months prior to the filing of this Statement (37 C.F.R. 1.97(e)(1)). A copy of the communication is enclosed for the Examiner's convenience.

The Examiner is requested to make the citations listed on the enclosed PTO-SB/08A of record in this application. Applicants would appreciate the Examiner initialing and returning the initialed copy of form PTO-SB/08A, indicating the references have been considered and made of record herein.

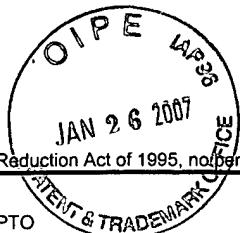
No fee is believed due as this statement is being submitted within three months of the mailing date of the enclosed foreign communication. However, if it is determined that fees are required, the Commissioner is hereby authorized to charge any necessary fees associated with this communication or credit any overpayment to Deposit Account No. 50-0815, Order No. UCSF-085CONS5.

Respectfully submitted,

BOZICEVIC, FIELD & FRANCIS LLP

By: 
Paula A. Borden, Reg. No. 42,344

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Approved for use through 07/31/2006. OMB 0651-0031

Approved for use through 07/01/2000. GMD 0951-0001
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 Substitute for form 1449A/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(use as many sheets as necessary)</i>		Complete if Known	
		Application Number	10/816,159
		Filing Date	March 31, 2004
		First Named Inventor	NADEL, JAY A.
		Art Unit	1614
		Examiner Name	Zara, Jane J.
Sheet	1	of	2
		Attorney Docket Number	UCSF-085CON5

U.S. PATENT DOCUMENTS

FOREIGN PATENT DOCUMENTS

Examiner Signature		Date Considered	
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. 1 Applicant's unique citation designation number (optional). 2 See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. 3 Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). 4 For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. 5 Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. 6 Applicant is to place a check mark here if English language Translation is attached.

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<p>Substitute for form 1449B/PTO</p> <p>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</p> <p>(use as many sheets as necessary)</p>		Complete if Known	
		Application Number	10/816,159
		Filing Date	March 31, 2004
		First Named Inventor	NADEL, JAY A.
		Art Unit	1614
		Examiner Name	Zara, Jane J.
Sheet	2	of	2
		Attorney Docket Number	
		UCSF-085CON5	

NON PATENT LITERATURE DOCUMENTS

Examiner Signature		Date Considered	
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹Applicant's unique citation designation number (optional). ²Applicant is to place a check mark here if English language Translation is attached.

Applicant's unique citation designation number (optional). Applicant is to place a check mark next to English language translation if desired.
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